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UTILITY PATENT APPLICA **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b)

Attorney Docket No.	P99,2	•			
Firs	t Named I	or Applicat	ion Identifier	PTC 0	
Andres Sommer				s. 571	
Express Mail Label	No:			0 d	
				20	

ADDRESS TO:

Assistant Commissioner for Patents

Box Patent Application

Washington, DC 20231

Washington, Do 20201			
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ACCOMPANYING APPLICATION PARTS		
1. X Specification [Total Pages 11] 2. X Drawing(s) (35USC 113) [Total Pages 2] 3. X Declaration and Power of Attorney [Total Pages 2] a. X Newly executed declaration (Original copy) b. Copy from prior application (37CFR 1.63(d)) (for continuation/divisional with Box 14 completed) [Note Box 4 Below] i. DELETION OF INVENTOR(S) Signed statement attached deleting Inventor(s) named in the prior application see 37 CFR 1.63(d)(2) and 1.33(b). 4. Incorporation By Reference (usable if Box 3b is checked)	5. X Assignment Papers (cover sheet & documentation) Siemens Aktiengesellschaft 6. Letter under 37 CFR 1.41(c). 7. English Translation Document (if applicable) 8. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 9. Preliminary Amendment 10. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 11. Small Entity Statement filed in prior application, Statement(s) Status still proper and desired		
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 3b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	Certified Copy of Priority Document(s) German Application No. 199 08 494.7 filed February 26, 1999 13 Other:		
14. If a CONTINUING APPLICATION, check appropriate box and supp			
Continuation Divisional Continuation-in-part (CIP)	of prior application No:/		

CLAIMS AS FILED					
	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) BASIC FEE \$690.00
	TOTAL CLAIMS 20	7			
	INDEPENDENT CLAIMS 3	1			
		ANY MULTIPLE DEPENDENT CLAIMS? ()YES (X) NO			
				TOTAL FILING FEE ->	\$690.00

The Commissioner is hereby authorized to charge any additional fees which may be required in connection with this application, or credit any overpayment to ACCOUNT NO. 08-2290. A duplicate copy of this sheet is enclosed.

A check in the amount of \$ 690.00 to cover the filing fee is enclosed.

15. CORRESPONDENCE ADDRESS

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SIGNATURE: 491/899:1190 DATE: January 31, 2000

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